

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

MADISON PROJECT INC.

ADDRESS (number and street) ▼

PO BOX 655

☐ Check if different than previously reported. (ACC)

ALEDO

TX

76008

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00298000

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☒ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:



Primary (12P)



Convention (12C)



General (12G)



Special (12S)



Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
04 01 2016

through

M M M / D D D / Y Y Y Y Y Y
04 30 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer PAUL A KILGORE

Signature of Treasurer

PAUL A KILGORE

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
05 20 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

MADISON PROJECT INC.

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
04		01		2016

To:

M M	/	D D	/	Y Y Y Y Y
04		30		2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div><div>Y Y Y Y Y</div><div>2016</div></div>		<div><div></div><div>19305.16</div></div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div><div></div><div>74821.75</div></div>	
(c) Total Receipts (from Line 19)	<div><div></div><div>16070.00</div></div>	<div><div></div><div>248582.35</div></div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div><div></div><div>90891.75</div></div>	<div><div></div><div>267887.51</div></div>
7. Total Disbursements (from Line 31).....	<div><div></div><div>26348.68</div></div>	<div><div></div><div>203344.44</div></div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<div><div></div><div>64543.07</div></div>	<div><div></div><div>64543.07</div></div>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<div><div></div><div>0.00</div></div>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<div><div></div><div>0.00</div></div>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

MADISON PROJECT INC.

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		0	1		2	0	1	6		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		3	0		2	0	1	6		

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

3471.00

35207.00

(ii) Unitemized

12599.00

82124.78

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

16070.00

117331.78

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

16070.00

117331.78

12. Transfers From Affiliated/Other

Party Committees.....

0.00

1122.28

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

128.29

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

130000.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

16070.00

248582.35

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

16070.00

248582.35

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	15132.69	115611.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	15132.69	115611.48
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2805.00	10920.00
24. Independent Expenditures (use Schedule E)	2.50	17721.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	1895.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	1895.00
29. Other Disbursements	8408.49	57196.96
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	26348.68	203344.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26348.68	203344.44

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	16070.00	117331.78
34. Total Contribution Refunds (from Line 28(d))	0.00	1895.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16070.00	115436.78
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	15132.69	115611.48
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	128.29
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	15132.69	115483.19

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 26

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. GLENN BAUGUSS JR.

Mailing Address 12 RIVER HOLLOW LANE

City
HOUSTON

State
TX

Zip Code
77027

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 21 / 2016

Transaction ID : SA11AI.382327

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JONNIE BROWN

Mailing Address 4861 TOM FALL RD

City
BAXTER

State
TN

Zip Code
38544

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 21 / 2016

Transaction ID : SA11AI.382368

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GARY BURNS

Mailing Address 828 N 25TH TERRACE

City
CORNELIUS

State
OR

Zip Code
97113

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

21.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 28 / 2016

Transaction ID : SA11AI.382391

Amount of Each Receipt this Period

11.00

☐ Memo Item

EM-BRIDENSTINE-TRANS20160503

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

611.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 26

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. WILLIAM CLYDE

Mailing Address 2623 PEBBLE DAWN

City

SAN ANTONIO

State

TX

Zip Code

78232

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

04 / 06 / 2016

Transaction ID : SA11AI.382236

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. TIMOTHY DOCTER

Mailing Address 7778 BOCA RATON DR

City

LAS VEGAS

State

NV

Zip Code

89113

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1110.00

Date of Receipt

04 / 21 / 2016

Transaction ID : SA11AI.382362

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RAFAEL GUASTAVINO

Mailing Address 23050 COLONEL LEONARD RD

City

ROCK HALL

State

MD

Zip Code

21661

FEC ID number of contributing
federal political committee.

C

Name of Employer

ISLAND PT FARM

Occupation

FARM MANAGER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20.00

Date of Receipt

04 / 28 / 2016

Transaction ID : SA11AI.382396

Amount of Each Receipt this Period

20.00

☐ Memo Item

EM-BRIDENSTINE-TRANS20160503

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

270.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. MR. GLEN R HAAS JR.

Mailing Address 880 OPEN SKY COURT

City
ALLEN

State
TX

Zip Code
75013

FEC ID number of contributing
federal political committee.

C

Name of Employer

ARAGIO SOLUTIONS

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 28 / 2016

Transaction ID : SA11AI.382397

Amount of Each Receipt this Period

50.00

☐ Memo Item

EM-BRIDENSTINE-TRANS20160503

Full Name (Last, First, Middle Initial)

B. BARRY HALVORSEN

Mailing Address 2702 WHITTLE WAY

City
MIDLAND

State
TX

Zip Code
79707

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 10 / 2016

Transaction ID : SA11AI.382270

Amount of Each Receipt this Period

50.00

☐ Memo Item

EM-GERSON-TRANS20160414

Full Name (Last, First, Middle Initial)

C. MR MILTON A HORST

Mailing Address 10118 44TH AVE SW

City
SEATTLE

State
WA

Zip Code
98146

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE BOEING COMPANY

Occupation

JORYWARG ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

30.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : SA11AI.382398

Amount of Each Receipt this Period

30.00

☐ Memo Item

EM-BRIDENSTINE-TRANS20160503

SUBTOTAL of Receipts This Page (optional)..... ►

130.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 9 OF 26

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. JACK MORROW

Mailing Address 22035 E HIGHWAY 20

City
BENDState
ORZip Code
97701FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		06		2016

Transaction ID : SA11AI.382185

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR PETER W MOYER

Mailing Address 118 ABBEY PEAK LN

City

INCLINE VILLAGE

State

NV

Zip Code

89451

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		06		2016

Transaction ID : SA11AI.382085

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JAY MOYERS

Mailing Address 5356 E BRIARWOOD CIR

City

CENTENNIAL

State

CO

Zip Code

80122

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04		06		2016

Transaction ID : SA11AI.382207

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

600.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 26

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. MICHAEL NOTZON

Mailing Address 303 GREEN GABLE DRIVE

City
VICTORIAState
TXZip Code
77904FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

150.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	28	/	2016

Transaction ID : SA11AI.382392

Amount of Each Receipt this Period

50.00

☐ Memo Item

EM-BRIDENSTINE-TRANS20160503

Full Name (Last, First, Middle Initial)

B. MS DOLORES E O'CONNOR

Mailing Address 852 STRANG DR

City
WANTAGHState
NYZip Code
11793FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2016

Transaction ID : SA11AI.382406

Amount of Each Receipt this Period

50.00

☐ Memo Item

EM-STUTZMAN-TRANS20160503

Full Name (Last, First, Middle Initial)

C. MS DOLORES E O'CONNOR

Mailing Address 852 STRANG DR

City
WANTAGHState
NYZip Code
11793FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2016

Transaction ID : SA11AI.382401

Amount of Each Receipt this Period

50.00

☐ Memo Item

EM-BRIDENSTINE-TRANS20160503

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 11 OF 26
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. RICHARD OLIVER

Mailing Address 16 SMITH ROAD

City	State	Zip Code
NANUET	NY	10954

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	28	/	2016

Transaction ID : SA11AI.382395

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BRIDENSTINE-TRANS20160503

Full Name (Last, First, Middle Initial)

B. GLENN REINDERS

Mailing Address 3479 SHERMAN RD

City	State	Zip Code
JACKSON	WI	53037

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2016

Transaction ID : SA11AI.382377

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. KENNETH ROLFE

Mailing Address 301 SE FOUNDATION DR

City	State	Zip Code
DALLAS	OR	97338

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	21	/	2016

Transaction ID : SA11AI.382338

Amount of Each Receipt this Period

150.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

225.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 12 OF 26
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. HARRY SCHMIDT

Mailing Address 7100 E BELLEVIEW AVE STE 307

City	State	Zip Code
GREENWOOD VILLAGE	CO	80111

FEC ID number of contributing
federal political committee.

C

Name of Employer

SCHMIDT & ASSOCIATES PC

Occupation

CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	1		2	0	1	6		

Transaction ID : SA11AI.382360

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RICHARD SHARP

Mailing Address 2766 WARREN ST

City	State	Zip Code
SANTA CRUZ	CA	95062

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			2	8		2	0	1	6		

Transaction ID : SA11AI.382393

Amount of Each Receipt this Period

50.00

☐ Memo Item

EM-BRIDENSTINE-TRANS20160503

Full Name (Last, First, Middle Initial)

C. MS GLENDA SHELTON

Mailing Address 10920 S 77TH EAST PL

City	State	Zip Code
TULSA	OK	74133

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

60.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4			3	0		2	0	1	6		

Transaction ID : SA11AI.382402

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BRIDENSTINE-TRANS20160503

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

575.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 26

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. PETER F. SHERIDAN

Mailing Address 210 E 23 ST

City

LONG BEACH TWSP

State

NJ

Zip Code

08008

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

160.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	29	/	2016

Transaction ID : SA11AI.382405

Amount of Each Receipt this Period

50.00

☐ Memo Item

EM-STUTZMAN-TRANS20160503

Full Name (Last, First, Middle Initial)

B. NEWBOLD STRONG

Mailing Address 4302 SHEEPS RUN

City

LAFAYETTE HILL

State

PA

Zip Code

19444

FEC ID number of contributing
federal political committee.

C

Name of Employer

INFORMATION REQUESTED

Occupation

INFORMATION REQUESTED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	06	/	2016

Transaction ID : SA11AI.382188

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JAMES STRZALKA

Mailing Address 3756 N LEAVITT ST

City

CHICAGO

State

IL

Zip Code

60618

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
04	/	06	/	2016

Transaction ID : SA11AI.382211

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

550.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 26

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. NANCY SWEATT

Mailing Address PO BOX 3087

City State Zip Code
 SANTA CRUZ CA 95063

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 29 / 2016

Transaction ID : SA11AI.382399

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BRIDENSTINE-TRANS20160503

Full Name (Last, First, Middle Initial)

B. JAMES TEEGERSTROM

Mailing Address 2115 DAKOTA ST

City State Zip Code
 NORMAN OK 73069

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 28 / 2016

Transaction ID : SA11AI.382394

Amount of Each Receipt this Period

25.00

☐ Memo Item

EM-BRIDENSTINE-TRANS20160503

Full Name (Last, First, Middle Initial)

C. RICHARD WALL

Mailing Address 2702 FOREST OAKS BLVD

City State Zip Code
 HOUSTON TX 77017

FEC ID number of contributing federal political committee.

C

Name of Employer

UNIVERSITY OF HOUSTON

Occupation

COMPUTER PRORAMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 21 / 2016

Transaction ID : SA11AI.382333

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

350.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 OF 26

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. SCOTT ZIERMAN

Mailing Address 44039 COLONY DR

City
LANCASTER

State Zip Code
CA 93536

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2016

Transaction ID : SA11AI.382400

Amount of Each Receipt this Period

10.00

☐ Memo Item

EM-BRIDENSTINE-TRANS20160503

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10.00

3471.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 26

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. ANEDOT

Mailing Address THIRD STREET, SUITE 2B

City BATON ROUGE State LA Zip Code 70801

Purpose of Disbursement
PAC CC TRANSACTION FEES

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 30 / 2016
Transaction ID : SB21B.382269

Amount of Each Disbursement this Period

172.68

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BANK OF AMERICA

Mailing Address 100 N TRYON ST

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement
PAC BANK FEES

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 04 / 2016
Transaction ID : SB21B.382273

Amount of Each Disbursement this Period

171.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BANK OF AMERICA

Mailing Address 100 N TRYON ST

City CHARLOTTE State NC Zip Code 28202

Purpose of Disbursement
PAC BANK FEES

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 12 / 2016
Transaction ID : SB21B.382305

Amount of Each Disbursement this Period

12.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

355.68

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 26

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. ELECTEK

Mailing Address PO BOX 23715

City CHAGRIN FALLS State OH Zip Code 44023

Purpose of Disbursement
PAC SOFTWARE

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 05 2016
Transaction ID : SB21B.382050

Amount of Each Disbursement this Period

900.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MAILCHIMP

Mailing Address 512 MEANS ST NW STE 404

City ATLANTA State GA Zip Code 30318

Purpose of Disbursement
PAC E-MARKETING

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 11 2016
Transaction ID : SB21B.382275

Amount of Each Disbursement this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MEDIA TEMPLE

Mailing Address 8520 NATIONAL BLVD BLDG A

City CULVER CITY State CA Zip Code 90232

Purpose of Disbursement
PAC WEB HOSTING

001

Candidate Name

Category/
Type
Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 14 2016
Transaction ID : SB21B.382306

Amount of Each Disbursement this Period

60.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1110.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 26

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. PAYCHEX

Mailing Address 911 PANORAMA TRAIL S.

City ROCHESTER State NY Zip Code 14625

Purpose of Disbursement
PAC PAYROLL SERVICE FEES

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 01 / 2016
Transaction ID : SB21B.382004

Amount of Each Disbursement this Period

174.49

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PAYCHEX

Mailing Address 911 PANORAMA TRAIL S.

City ROCHESTER State NY Zip Code 14625

Purpose of Disbursement
PAC PAYROLL TAXES

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 01 / 2016
Transaction ID : SB21B.382003

Amount of Each Disbursement this Period

1502.02

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PAYCHEX

Mailing Address 911 PANORAMA TRAIL S.

City ROCHESTER State NY Zip Code 14625

Purpose of Disbursement
PAC PAYROLL SERVICE FEES

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President
State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 29 / 2016
Transaction ID : SB21B.382387

Amount of Each Disbursement this Period

183.48

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1859.99

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 26

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. PAYCHEX

Mailing Address 911 PANORAMA TRAIL S.

City ROCHESTER State NY Zip Code 14625

Purpose of Disbursement
PAC PAYROLL TAXES

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 29 2016
Transaction ID : SB21B.382386

Amount of Each Disbursement this Period

1502.02

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PROFESSIONAL DATA SERVICES

Mailing Address 824 S MILLEDGE AVE STE 101

City ATHENS State GA Zip Code 30605

Purpose of Disbursement
PAC COMPLIANCE CONSULTING

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 14 2016
Transaction ID : SB21B.382276

Amount of Each Disbursement this Period

2508.49

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JIM RYUN

Mailing Address 132 D ST SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
PAC STAFF SALARY

001

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 01 2016
Transaction ID : SB21B.382002

Amount of Each Disbursement this Period

3880.48

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7890.99

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

NAME OF COMMITTEE (In Full)
MADISON PROJECT INC.

A. JIM RYUN

Mailing Address 132 D ST SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
PAC STAFF SALARY

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement



Transaction ID : SB21B.382385

Amount of Each Disbursement this Period

3880.48

 Memo Item

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Amount of Each Disbursement this Period

A diagram of a rectangular frame. It consists of a horizontal beam at the top and a horizontal beam at the bottom, connected by vertical supports. The top beam has 10 evenly spaced vertical hangers. The bottom beam has 10 evenly spaced vertical hangers. The left and right vertical supports are shown as thick vertical lines. The interior of the frame is white.

 Memo Item

SUBTOTAL of Disbursements This Page (optional).....

3880.48

TOTAL This Period (last page this line number only).....

15097.14

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JIM BRIDENSTINE INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Mailing Address PMB 230

8086 SOUTH YALE

City
TULSAState
OKZip Code
74136Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001

Candidate Name

JAMES FREDERICK BRIDENSTINECategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: OK District: 01

Transaction ID : SB23.382042

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF JIM BRIDENSTINE INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Mailing Address PMB 230

8086 SOUTH YALE

City
TULSAState
OKZip Code
74136Purpose of Disbursement
EARMARKED BY KAREN LINEHAN ID# 29512

001

Candidate Name

JAMES FREDERICK BRIDENSTINECategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: OK District: 01

Transaction ID : SB23.382043

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF MIKE LEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Mailing Address 10 WEST BROADWAY STE. 500

City
SALT LAKE CITYState
UTZip Code
84101Purpose of Disbursement
TRANSMITTAL OF EARMARKS

001

Candidate Name

MIKE LEECategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☐ General
☒ Other (specify) ▼
CONVENTION

State: UT District: 00

Transaction ID : SB23.382044

Amount of Each Disbursement this Period

25.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

35.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. FRIENDS OF MIKE LEE

Mailing Address 10 WEST BROADWAY STE. 500

City	State	Zip Code
SALT LAKE CITY	UT	84101

Purpose of Disbursement
EARMARKED BY KAREN LINEHAN ID# 29512

Candidate Name

MIKE LEEOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☐ Primary ☐ General
☒ Other (specify) ▼
CONVENTION

State: UT District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : SB23.382045

Amount of Each Disbursement this Period

25.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

B. GERSON FOR CONGRESS

Mailing Address PO BOX 1465

City	State	Zip Code
BURNSVILLE	MN	55337

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

Candidate Name

DAVID ADAM GERSONOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2016

Transaction ID : SB23.382279

Amount of Each Disbursement this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GERSON FOR CONGRESS

Mailing Address PO BOX 1465

City	State	Zip Code
BURNSVILLE	MN	55337

Purpose of Disbursement
EARMARKED BY BARRY HALVORSEN ID# 148860

Candidate Name

DAVID ADAM GERSONOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		10		2016

Transaction ID : SB23.382280

Amount of Each Disbursement this Period

50.00

☒ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

50.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. JIM BANKS FOR CONGRESS INC.

Mailing Address PO BOX 11431

City	State	Zip Code
FORT WAYNE	IN	46858

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

Candidate Name

JAMES E BANKSOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Transaction ID : SB23.382040

Amount of Each Disbursement this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JIM BANKS FOR CONGRESS INC.

Mailing Address PO BOX 11431

City	State	Zip Code
FORT WAYNE	IN	46858

Purpose of Disbursement
EARMARKED BY KAREN LINEHAN ID# 29512

Candidate Name

JAMES E BANKSOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		28		2016

Transaction ID : SB23.382041

Amount of Each Disbursement this Period

10.00

☒ Memo Item

Full Name (Last, First, Middle Initial)

C. RON DESANTIS FOR FLORIDA

Mailing Address 133 S HARBOR DRIVE

City	State	Zip Code
VENICE	FL	34285

Purpose of Disbursement
TRANSMITTAL OF EARMARKS

Candidate Name

RONALD DESANTISOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Transaction ID : SB23.382046

Amount of Each Disbursement this Period

2710.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2720.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 26

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

MADISON PROJECT INC.

Full Name (Last, First, Middle Initial)

A. ELECTEK

Mailing Address PO BOX 23715

City	State	Zip Code
CHAGRIN FALLS	OH	44023

Purpose of Disbursement
PAC SOFTWARE (NON-CONTRIBUTION ACCOUNT)

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		05		2016

Transaction ID : SB29.382051

Amount of Each Disbursement this Period

900.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PROFESSIONAL DATA SERVICES

Mailing Address 824 S MILLEDGE AVE STE 101

City	State	Zip Code
ATHENS	GA	30605

Purpose of Disbursement
PAC COMPLIANCE CONSULTING (NON-CONTRIBUTION ACCOUNT)

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2016

Transaction ID : SB29.382278

Amount of Each Disbursement this Period

2508.49

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RESURGENT MEDIA LLC

Mailing Address 736 WAVERLY PT

City	State	Zip Code
MACON	GA	31210

Purpose of Disbursement
PAC ADVERTISING (NON-CONTRIBUTION ACCOUNT)

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		14		2016

Transaction ID : SB29.382277

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8408.49

8408.49

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 26 OF 26
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) MADISON PROJECT INC.			FEC IDENTIFICATION NUMBER ▼ C C00298000		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee MADISON PROJECT INC.			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 10 / 2016		
Mailing Address PO BOX 15179			Amount 2.50		
City WASHINGTON		State DC	Zip Code 20003		Transaction ID : SE.382271
Purpose of Expenditure ONLINE PROCESSING FEES		Category/Type 001	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 04 / 10 / 2016		
Name of Federal Candidate DAVID ADAM GERSON			Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MN</u>		
Calendar Year-To-Date Per Election for Office Sought 9.50			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y		
Mailing Address			Amount 		
City		State	Zip Code		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Purpose of Expenditure		Category/Type 			
Name of Federal Candidate			Office Sought: <input type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought 			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 2.50					
(b) SUBTOTAL of Unitemized Independent Expenditures▶ 					
(c) TOTAL Independent Expenditures.....▶ 2.50					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
MR. PAULA KILGORE			[Electronically Filed]		
Signature			Date M M / D D / Y Y Y Y Y Y 05 / 20 / 2016		